IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE: MYRNA DORIS HURTADO DELGADO DEBTOR	CASE NO. 13-09384/ESL/ESL CHAPTER 7

DEBTOR'S MOTION AND NOTICE OF FILING OF AMENDED SCHEDULES "I" & "J" AND CERTIFICATE OF SERVICE

TO THE HONORABLE COURT:

NOW COMES, MYRNA DORIS HURTADO DELGADO, debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

1. The debtor is hereby submitting ***Amended Schedules "I" & "J"***, dated January 19th, 2017, herewith and attached to this motion.

2. These amendments to Schedules "I" & "J" are filed ***to state debtor's actual income and expenses.***

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within fourteen (14) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9013(c) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 7 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtor and to all creditors and interested parties appearing in the master address list, hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 19th day of January, 2017.

/s/ Roberto Figueroa Carrasquillo
ROBERTO FIGUEROA CARRASQUILLO
USDC #203614
ATTORNEY FOR PETITIONER
PO BOX 186
CAGUAS PR 00726
TEL 787-744-7699
FAX 787-746-5294
EMAIL: rfigueroa@rfclawpr.com

Fill in this information to identify your case:

Debtor 1 MYRNA DORIS HURTADO DELGADO

Debtor 2 ______________________
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 3:13-bk-9384
(If known)

Check if this is:

■ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

____
MM / DD/ YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	■ Employed ☐ Not employed	☐ Employed ☐ Not employed
Occupation	TEACHER	
Employer's name	Departamento de Educacion	
Employer's address	5 Estanbar Urb. Caguas Norte MANUEL A TO Caguas, PR 00725	
How long employed there?	24 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	$ 2,680.00	$ N/A
3. **Estimate and list monthly overtime pay.**	3.	+$ 0.00	+$ N/A
4. **Calculate gross Income.** Add line 2 + line 3.	4.	$ 2,680.00	$ N/A

Debtor 1 HURTADO DELGADO, MYRNA DORIS Case number (*if known*) 3:13-bk-9384

		Line	For Debtor 1	For Debtor 2 or non-filing spouse
	Copy line 4 here	4.	$ 2,680.00	$ N/A
5.	**List all payroll deductions:**			
5a.	**Tax, Medicare, and Social Security deductions**	5a.	$ 81.92	$ N/A
5b.	**Mandatory contributions for retirement plans**	5b.	$ 0.00	$ N/A
5c.	**Voluntary contributions for retirement plans**	5c.	$ 0.00	$ N/A
5d.	**Required repayments of retirement fund loans**	5d.	$ 0.00	$ N/A
5e.	**Insurance**	5e.	$ 0.00	$ N/A
5f.	**Domestic support obligations**	5f.	$ 0.00	$ N/A
5g.	**Union dues**	5g.	$ 0.00	$ N/A
5h.	**Other deductions.** Specify: GPR Plan de Retiro Maestro	5h.+	$ 241.20	+ $ N/A
	RM-Pres Pers de Cuota-Ret Maestro		$ 427.78	$ N/A
	SM-Asoc Maestros de PR		$ 150.00	$ N/A
	SC-Amer Fam Life Ass Co		$ 51.10	$ N/A
	SC-Multinational Life		$ 35.32	$ N/A
	AE-Seguro por Muertes Asoc ELA		$ 13.60	$ N/A
	Ahorros AEELA		$ 80.40	$ N/A
6.	**Add the payroll deductions.** Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	$ 1,081.32	$ N/A
7.	**Calculate total monthly take-home pay.** Subtract line 6 from line 4.	7.	$ 1,598.68	$ N/A
8.	**List all other income regularly received:**			
8a.	**Net income from rental property and from operating a business, profession, or farm** Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	$ 0.00	$ N/A
8b.	**Interest and dividends**	8b.	$ 0.00	$ N/A
8c.	**Family support payments that you, a non-filing spouse, or a dependent regularly receive** Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	$ 0.00	$ N/A
8d.	**Unemployment compensation**	8d.	$ 0.00	$ N/A
8e.	**Social Security**	8e.	$ 0.00	$ N/A
8f.	**Other government assistance that you regularly receive** Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	$ 0.00	$ N/A
8g.	**Pension or retirement income**	8g.	$ 0.00	$ N/A
8h.	**Other monthly income.** Specify: Christmas Bonus $1,000./12	8h.+	$ 83.34	+ $ N/A
9.	**Add all other income.** Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	$ 83.34	$ N/A

10. **Calculate monthly income.** Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. $ 1,682.02 + $ N/A = $ 1,682.02

11. **State all other regular contributions to the expenses that you list in *Schedule J.***
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.
Specify: 11. +$ 0.00

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income. Write that amount on the *Summary of Schedules* and *Statistical Summary of Certain Liabilities* and Related *Data,* if it applies 12. $ 1,682.02

Combined monthly income

13. **Do you expect an increase or decrease within the year after you file this form?**
- ■ No.
- ☐ Yes. Explain:

Fill in this information to identify your case:

Debtor 1 MYRNA DORIS HURTADO DELGADO

Debtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 3:13-bk-9384
(If known)

Check if this is:

■ An amended filing

☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**

■ No. Go to line 2.

☐ Yes. **Does Debtor 2 live in a separate household?**

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. **Do you have dependents?** ■ No

Do not list Debtor 1 and Debtor 2. ☐ Yes. Fill out this information for each dependent..............

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?** ■ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4.	$ 0.00
If not included in line 4:		
4a. Real estate taxes	4a.	$ 0.00
4b. Property, homeowner's, or renter's insurance	4b.	$ 0.00
4c. Home maintenance, repair, and upkeep expenses	4c.	$ 0.00
4d. Homeowner's association or condominium dues	4d.	$ 0.00
5. **Additional mortgage payments for your residence,** such as home equity loans	5.	$ 0.00

Debtor 1 HURTADO DELGADO, MYRNA DORIS Case number (if known) 3:13-bk-9384

6.	**Utilities:**		
	6a. Electricity, heat, natural gas	6a.	$ 0.00
	6b. Water, sewer, garbage collection	6b.	$ 0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$ 0.00
	6d. Other. Specify: Telefono Con Internet	6d.	$ 60.00
7.	**Food and housekeeping supplies**	7.	$ 477.02
8.	**Childcare and children's education costs**	8.	$ 0.00
9.	**Clothing, laundry, and dry cleaning**	9.	$ 80.00
10.	**Personal care products and services**	10.	$ 80.00
11.	**Medical and dental expenses**	11.	$ 260.00
12.	**Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$ 130.00
13.	**Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$ 70.00
14.	**Charitable contributions and religious donations**	14.	$ 0.00
15.	**Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	$ 0.00
	15b. Health insurance	15b.	$ 0.00
	15c. Vehicle insurance	15c.	$ 0.00
	15d. Other insurance. Specify:	15d.	$ 0.00
16.	**Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	$ 0.00
17.	**Installment or lease payments:**		
	17a. Car payments for Vehicle 1	17a.	$ 0.00
	17b. Car payments for Vehicle 2	17b.	$ 0.00
	17c. Other. Specify:	17c.	$ 0.00
	17d. Other. Specify:	17d.	$ 0.00
18.	**Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$ 0.00
19.	**Other payments you make to support others who do not live with you.** Specify:	19.	$ 0.00
20.	**Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income.***		
	20a. Mortgages on other property	20a.	$ 0.00
	20b. Real estate taxes	20b.	$ 0.00
	20c. Property, homeowner's, or renter's insurance	20c.	$ 0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	$ 0.00
	20e. Homeowner's association or condominium dues	20e.	$ 0.00
21.	**Other:** Specify: Lunch At Work	21.	+$ 120.00
	Beauty		+$ 50.00
	Emergency Funds		+$ 100.00
	Work materials		+$ 140.00
	Cigarettes		+$ 45.00
	Eye glasses expenses $100/12		+$ 0.00
	Work uniforms		+$ 70.00
22.	**Calculate your monthly expenses**		
	22a. Add lines 4 through 21.		$ 1,682.02
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		$
	22c. Add line 22a and 22b. The result is your monthly expenses.		$ 1,682.02
23.	**Calculate your monthly net income.**		
	23a. Copy line 12 *(your combined monthly income)* from Schedule I.	23a.	$ 1,682.02
	23b. Copy your monthly expenses from line 22c above.	23b.	-$ 1,682.02
	23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income.*	23c.	$ 0.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.
☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 MYRNA DORIS HURTADO DELGADO
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 3:13-bk-9384
(if known)

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of person ____________________ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X ____________________ X ____________________

MYRNA DORIS HURTADO DELGADO
Signature of Debtor 1

Signature of Debtor 2

Date January 18, 2017

Date ____________________

Label Matrix for local noticing
0104-3
Case 13-09384-ESL7
District of Puerto Rico
Old San Juan
Wed Jan 18 12:54:17 AST 2017

EDUCOOP
PEDRO I TORRES AMADOR ESQ
PO BOX 364966
SAN JUAN, PR 00936-4966

MIDLAND FUNDING LLC BY AMERICAN INFOSOURCE L
ATTN DEPARTMENT 1
PO BOX 4457
HOUSTON, TX 77210-4457

Quantum3 Group LLC as agent for
MOMA Funding LLC
PO Box 788
Kirkland, WA 98083-0788

UNITED STATES TRUSTEE
500 TANCA ST STE 301
SAN JUAN, PR 00901-1922

US Bankruptcy Court District of P.R.
Jose V Toledo Fed Bldg & US Courthouse
300 Recinto Sur Street, Room 109
San Juan, PR 00901-1964

AEELA
PO BOX 364508
SAN JUAN, PR 00936-4508

AT&T Wireless
PO Box 8217
SOUTH HACKENSACK, NJ 07606-8217

BANCO POPULAR DE PUERTO RICO
BANKRUPTCY DEPARTMENT
PO BOX 366818
SAN JUAN PR 00936-6818

Banco Popular De Puert
PO Box 3228
San Juan, PR 00936

DEPARTAMENTO DE HACIENDA
PO BOX 1055
CAGUAS, PR 00726-1055

Department of Treasury
Bankruptcy Section (Suite 1504)
235 Ave. Arterial Hostos
San Juan Puerto Rico 00918-1451

EDUCOOP
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San Juan, PR 00917-3713

FIRST NATIONAL
PO BOX 80015
LOS ANGELES, CA 90080-0015

FIRST NATIONAL COLLECTION BUREAU
610 WALTHAM WAY
MCCARRAN, NV 89434-6695

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104-4868

HOSPITAL GENERAL MENONITA INC
PO BOX 373130
CAYEY PR 00737 3130

Hospital Menonita
ATT Depto De Cobros
PO Box 373130
Cayey, PR 00737-3130

IRS
PO BOX 7346
PHILADELPHIA, PA 19101-7346

Islandfin
PO BOX 71504
San Juan, PR 00936-8604

Midland Funding LLC
by American InfoSource LP as agent
ATTN: Department 1
PO Box 4457
Houston, TX 77210-4457

Nco Ptm/19
507 Prudential Rd
Horsham, PA 19044-2308

PALISADES COLLECION, L.L.C
GE MONEY BANK
PO BOX 1244
ENGLEWOOD CLIFFS, NJ 07632-0244

PR ACQUISITIONS LLC
PO BOX 194499
SAN JUAN PR 00919-4499

Palisades Collection, LLC
Vativ Recovery Solutions LLC, dba SMC
As Agent For Palisades Collection, LLC
PO Box 40728
Houston TX 77240-0728

(p)SPRINT NEXTEL CORRESPONDENCE
ATTN BANKRUPTCY DEPT
PO BOX 7949
OVERLAND PARK KS 66207-0949

Sr. Ricardo Torres Bonilla
Urb Caguas Norte Calle Paris A D -29
Caguas, PR 00725

TRANSWORLD SYSTEMS INC
PO BOX 17221
WILMINGTON, DE 19850-7221

JOSE RAMON CARRION MORALES
CHAPTER 13 TRUSTEE
PO BOX 9023884
SAN JUAN, PR 00902-3884

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MYRNA DORIS HURTADO DELGADO
URB CAGUAS NORTE
I 9 CALLE GENOVEVA
CAGUAS, PR 00725-2213

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PO BOX 186
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ROBERTO ROMAN VALENTIN
US TRUSTEES OFFICE
PO BOX 9024003
SAN JUAN, PR 00902-4003

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g)(4).

Sprint Nextel
Attn Bankruptcy Dept
PO Box 7949
Overland Park KS 66207-0949

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d)Quantum3 Group LLC as agent for
MOMA Funding LLC
PO Box 788
Kirkland, WA 98083-0788

End of Label Matrix	
Mailable recipients	34
Bypassed recipients	1
Total	35